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CONFIRMATION NO. 8066

<b>SERIAL NUMBER</b> 10/541,991	<b>FILING OR 371(c) DATE</b> 07/05/2005 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1625	<b>ATTORNEY DOCKET NO.</b> 65369-US-PCT1
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a 371 of PCT/US04/00175 01/06/2004 which is a CON of 10/345,063 01/14/2003 PAT 7,105,544  
 which is a CIP of 10/188,434 07/03/2002 PAT 6,727,264  
 which claims benefit of 60/346,997 01/09/2002  
 and claims benefit of 60/303,091 07/05/2001

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <i>[Signature]</i> Initials	<b>STATE OR COUNTRY</b> NJ	<b>SHEETS DRAWING</b> 0	<b>TOTAL CLAIMS</b> 15	<b>INDEPENDENT CLAIMS</b> 3
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**ADDRESS**

45821

**TITLE**

Substituted alkyl amido piperidines

<b>FILING FEE RECEIVED</b> 850	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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